

## FY 2024 MHAA Marketing Grant Application

### Instructions

#### FY2024 MARYLAND HERITAGE AREAS PROGRAM MARKETING GRANT APPLICATION

Application Deadline (online submission):  
11:59 pm on May 19, 2023

#### INSTRUCTIONS

Applications must be submitted jointly by the Certified Heritage Area and the appropriate Destination Marketing Organization(s) ("DMOs"). The Certified Heritage Area and DMOs must have jointly completed within the last 24 months a heritage areas marketing plan applicable to the time period when marketing activities proposed in this application will occur in order to be eligible to apply for funding of marketing activities. The Primary Applicant will be the organization that will be responsible for administering the grant and any grant funds awarded. The Co-Applicant(s) must provide a letter of authorization, and certify that they support the submission of the application and approve the heritage area marketing plan that is submitted.

- All questions with a red asterisk (\*) require answers.
- Please use plain text. Content will not retain formatting such as bold, italics, or bullets.
- When you have completed your application, click **Review and Submit**. You will be given a final opportunity to review your application. If you have included all the required fields and materials, you will be able to click **Submit**.
- **You must submit your final application no later than 11:59 p.m. on May 19, 2023.**

We will contact you if we have questions during our review.

**Grant award decisions will be made in July 2023, and you will notified by email of the final award decisions.**

#### HOW TO

- **Spell-check:** click the check mark to the right of the field.
- **Save a draft:** click **Save and Finish Later** at the top and bottom of each page. You may also click **Next** to continue the application, which will also save your work.
- **Upload documents:**
  - Click the **Browse** button.
  - Browse to the location of the document on your computer.
  - Highlight the document, and click **Open** or **OK**.
  - Click the **Upload** button.

#### Acknowledgement

**Please click this box to indicate that you have read and understand the guidelines, available [HERE](#).**

No

## Overview

### Organization Name

This is the organization that will be the primary applicant for this marketing grant. This organization will be responsible for the administration of the project and any awarded grant funds.

### Project Title

FY 2024 Marketing Grant

### Heritage Area

**Which county or counties are included in the heritage area?**

## Project Design

### Project Design

#### Project Description

Describe the project, providing background information on how the proposed marketing strategies were developed and what the marketing objectives are.

#### Project Methodology

Describe the methodology of the project, outlining each step you will use to achieve your marketing objectives. Be sure to describe your inquiry fulfillment process.

#### Grant Project Start Date

The date you plan to start work.

This date should not be earlier than July 13, 2023.

#### Grant Project End Date

Should be no more than two years from the project start date. Note - you will not be able to receive another marketing grant until the current grant is closed.

#### Key Steps and Timeline

Provide an outline schedule / sequence for the project. Include other phases (identified as outside the grant project) if applicable.

## Budget

## Project Budget

- The project budget is an important aspect of your grant application, and it is necessary for you to review the [grant guidelines](#) in order to fill out your budget correctly.
- Please note that ALL applicants are REQUIRED to provide a dollar-for-dollar match to the grant, which may be any combination cash and in-kind sources.
- All match MUST be expended during the grant period, which will commence no earlier than July 13, 2023.
- Before completing the budget fields below on this page, complete your detailed budget using the Excel spreadsheet which you can download and complete by clicking [HERE](#). You must use this form.
- You will use the numbers from the Excel spreadsheet to fill out the fields below, on this page.

### Detailed Project Budget

Please complete a detailed project budget. The required form is available [HERE](#). Once you have completed the project budget, upload it here as an Excel file.

## Grant Funds Requested

### Grant Funds Requested

The maximum amount you can request for an MHAA Marketing Grant is \$25,000 if you are requesting a 1-year grant award and \$50,000 if you are requesting a 2-year grant award. The minimum is \$5,000. Round up to the nearest dollar.

## Matching Funds

### Proposed Total Match

What is the dollar amount of the total match funds that you will provide for your required one-to-one match? You may provide any combination of cash and in-kind match from non-state sources. State employee time is eligible as match.

### Upload documentation of match here.

Documentation of match can include: bank statements showing cash in hand, a letter of commitment from a donor or grant source, a letter of credit or available funds from a bank, letters from volunteers, and/or letters from vendors committing to donate materials or services. If you have multiple letters or pages of documentation, you can scan them into a single PDF document for upload, or attach the additional pages on the Attachment Page at the end of the application.

### Other Project Costs

Many projects cost far more than the requested amount and the required match. In order to understand the full cost of the project, we ask that you list the additional project costs as well. So if

the total project is going to cost \$200,000, and you are requesting a grant of \$50,000, with a proposed \$50,000 match, the Other Project Costs would be \$100,000.

**List the source(s) of all non-state matching funds you are including in your proposed project costs. Please indicate if the funds and support are in-hand, committed, or not yet available.**

Include grants from non-state agencies that you have applied for but do not know the outcome, loan applications in progress, or research into possible funding options.

**Describe any state funds that are already committed for this project.**

Other state funds may not be part of the match for this grant, but they may be a significant source of other funds for your project.

**Total State Funds Already Committed**

### Budget Comments

**Provide any additional details about your budget line items that you would like share with grant reviewers.**

**Please upload any supporting documentation for your budget (e.g. estimates, correspondence containing pricing options, list prices for items described in the budget).** If you need to upload multiple documents, you can upload the first document here, and any others on the Attachments page.

## Marketing Plan

### Heritage Area Marketing Plan

Using the outline available [HERE](#), submit a copy of the approved Heritage Area Marketing Plan, which should reflect the goals and objectives of the Heritage Area Management plan, and have been completed in coordination with the affiliated DMO(s) within the last 24 months, and be applicable to the time period when marketing activities will occur.

## Deliverables

### Impact

#### What tangible products will the project produce?

Specify the number of products, i.e. 5,000 brochures or 10 newspaper advertisements. Ensure that all listed products are also included in the Project Timetable and Budget.

#### If the project product(s) include items that require ongoing maintenance, commitment, repair or replacement, how will this be carried out and paid for in the future?

This can include website/smart phone app fees and updates. For technology items, please discuss how long the product will be live and active.

**If applicable, what provisions exist or will be made for physical or programmatic access by individuals?**

## Project Mgmt

### Project Management

**Describe your organization's administrative and financial experience and ability to manage a grant of this type.**

Provide examples of other grants your organization has received and successfully managed.

**Who will staff your heritage area's marketing activities and who will be responsible for the various components of the heritage area's marketing plan?**

**Identify any key individuals outside of the applicant organization who will be involved in the implementation of this project (i.e. contractors or consultants who have already been selected).**

### Project Contact Person

This is the person who will receive all correspondence and communication regarding the grant.

**Prefix**                      **First Name**

- Select One -

**Last Name**

**Title**

**Address**

**City**              **State**  
<None>

**Zip Code**

**Phone**

**Extension**

**E-mail**

**Please upload a resume for the primary contact.**

**Letters of Support****Support for the Project****Federal Legislative Districts**

Please indicate the Federal legislative district in which your project property (not your organization) is located. To look it up, click [HERE](#).

**State Legislative Districts**

Please indicate the Maryland state legislative district in which your project property (not your organization) is located. To look it up, click [HERE](#).

**Please list the elected officials and other individuals from whom you have requested letters of support. You are encouraged to have letters from a State Delegate and a State Senator representing the district within which the project property is located; other letters may come from local elected officials, prominent community leaders, or subject matter experts, for example.**

**If you have copies of the support letters, you can upload them here. (Sometimes the letters are sent directly to MHT.) You can upload additional letters on the Attachments Page at the end of the application.**

Letter of Support

Letter of Support

Letter of Support

Letter of Support

**Primary Applicant****Applicant Organization**

**This is the organization that will be responsible for all grant paperwork and grant funds.**

The name provided must match EXACTLY the legal name as registered with the Maryland State Department of Assessments and Taxation (SDAT). You can check your organization's legal name by clicking [HERE](#).

**Organization Type****Tax ID / Federal Employer Identification Number (EIN)**

For non-profit organizations and government agencies, this is generally a 9-digit number, e.g. 52-1234567. For individuals/private owners, enter your social security number.

**Mailing Address**

**City**      **State**  
- Select One -

**Zip Code**

**Organization General Phone Number**

**Extension**

**Organization General Email Address****Website Address****Organizational Documents**

Non-profit organizations must upload copies of their organizational documents. For most organizations this will include the filed Articles of Incorporation or Articles of Organization, and Bylaws or an Operating Agreement. Government entities do not need to upload organizational documents.

You can upload one document in each upload box. If you need to upload additional documents, you can add them on the Attachments page at the end of the application.

**There is no need to upload these documents if you have submitted them in MHAA within the past several years, unless you have updated versions to submit.**

**Additional Organizational Document****Proof of Non-Profit Status (if applicable)**

Co-Applicant(s)

Please list the contact information for the co-applicant(s). Do not include the organization and contact person listed as the primary applicant. There must be at least one co-applicant, either the Certified Heritage Area, or a Destination Marketing Organization where the marketing activities will occur. The co-applicant(s) must provide a letter of authorization for the application, and certify that they support the submission of the application and approve the heritage area marketing plan that is submitted.

Co-Applicant 1
First Name
Last Name
Title
Organization
Office Phone
Extension
E-mail

Co-Applicant 2
First Name
Last Name
Title
Organization



**Office Phone**

**Extension**

**E-mail**

**Co-Applicant 3**

**First Name**

**Last Name**

**Title**

**Organization**

**Office Phone**

**Extension**

**E-mail**

**Co-Applicant 4**

**First Name**

**Last Name**

**Title**

**Organization**

**Office Phone**

**Extension**

**E-mail****Co-Applicant Letter of Authorization**

Each Co-Applicant must submit a letter of authorization indicating their support of the grant submission and the heritage area marketing plan. A sample letter is available [HERE](#). If there is more than one co-applicant, additional letters of support can be uploaded on the Attachments page at the end of the application.

**Release & Consent****Release and Consent**

MHT/MHAA regularly shares information about projects that have received grant funding. Application materials, including photographs, maps, text, graphics, and forms may be used by MHT/MHAA for non-profit purposes including, but not limited to, education and publicity via printed material, television broadcasts, and internet postings. MHT/MHAA does NOT share applicants' financial information unless required to do so by law.

Photographs of the project which have been taken by MHT staff may also be made available to the public.

In rare cases, application information may be requested under Maryland's Access to Public Records Act (the "Act").

By executing this release and consent, I hereby consent to the publication of photographs and other application materials relating to the Project for which I have received financial assistance, and I hereby authorize MHT/MHAA to print, publish or post pictures of the Project and to make application materials available to the public.

If you consider information in this application confidential and do not want it made available to the public, please indicate your objections in writing and upload your letter below.

**Upload your letter of objection, if applicable, here.**

**I have read and understand that, by not attaching an objection in writing, I have consented to public use of information in this application and a waiver of any rights I may have under the Act.**

Do not check the box if you have uploaded a letter of objection.

No

**Legal Authorization**

**I certify that all the information contained in this application is true and accurate and that I am legally authorized to submit this application on behalf of the applicant organization.**

No

**Full Name of Legally Authorized Submitter**

This must be someone legally authorized to sign for your organization.